

INVESTIGATION OF SOMATIZATION, MENTAL CAPACITY AND VERBAL FLUENCY IN ALEXITHYMIC AND NON- ALEXITHYMIC PATIENTS APPLYING TO PSYCHIATRY OUTPATIENT CLINIC

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BACKGROUND AND AIM: A review of the literature shows a significant relationship between alexithymia and somatization, with growing interest in recent years. Identifying mediating factors is key to understanding the underlying mechanism. This study compares somatization symptoms, mental capacity, and verbal fluency in patients with and without alexithymia, independent of diagnosis.

METHODS: Current study included 72 patients who consecutively applied to Necmettin Erbakan University Faculty of Medicine psychiatry outpatient clinic. Informed consent was obtained. Participants completed a sociodemographic form, Patient Health Questionnaire(PHQ-15), Beck Depression Inventory(BDI), Beck Anxiety Inventory(BAI), Verbal Fluency Test, National Adult Reading Test-Turkey(NART-TR), Toronto Alexithymia Scale (TAS-20). Research necessary permissions were obtained from the local ethics committee(IRB Date/Number:2025/5493).

RESULTS: A total of 72 patients were included: 31 with Anxiety Disorder, 20 with Major Depressive Disorder, 7 with Obsessive-Compulsive Disorder, 6 with Attention Deficit Hyperactivity Disorder, 4 with Bipolar Affective Disorder, and 4 with Psychotic Disorder. When evaluated based on the TAS-20 cutoff score, 27 were alexithymic. No significant differences

were found between groups in gender, marital status, living arrangements, or employment ($p=0.950$, $p=0.301$, $p=0.410$, $p=0.369$, respectively). The mean age of the patient group with alexithymia and the presence of family history were found to be low($p=0.044$, $p=0.025$, respectively). The alexithymic group had higher mean scores on the BAI, BDI, and PHQ-15($p=0.003$, $p=0.000$, $p=0.004$, respectively). However, no statistically significant differences were found in the NART-TR and verbal fluency subscales ($p=0.884$, $p>0.05$). Nevertheless, a moderate positive correlation was observed between alexithymia and somatization scores ($r=0.540$), while no significant correlation was found between alexithymia with NART-TR and verbal fluency scores ($r=-0.094$, $r=0.097$, respectively).

CONCLUSIONS: The result of present study support the relationship between alexithymia and somatization, consistent with the literature. However, the relationship between alexithymia and verbal fluency or mental capacity was non-significant, contrary to our expectations. Further studies with larger and more homogeneously designed samples across patient groups are needed.

Keywords: Alexithymia, depression, NART-TR, somatization, verbal fluency